



City of Austin

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District 7**

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Improving City Operations

Item S-13

Community-Led Graffiti Abatement Efforts

This proposal would invest in a low-dollar, high-impact approach to addressing graffiti vandalism.

- This item takes a low-dollar, high-impact approach that would invest \$35,000 in nearly 900 abatement kits that communities can use to respond rapidly to graffiti and in marketing materials the city can use to raise public awareness about graffiti regulations and abatement resources.¹

Graffiti vandalism affects quality of life – and is a problem in Austin.

- According to a U.S. Department of Justice publication, “graffiti contributes to lost revenue associated with reduced ridership on transit systems, reduced retail sales, and declines in property value.”²
- Rapidly removing graffiti is an important strategy for preventing individuals from continuing to vandalize an area, with many cities aiming to remove graffiti vandalism in one to two days.¹ In Austin, however, it has taken over two months on average to remove graffiti. (See Table 1.)

**Table 1. Austin Public Health
Graffiti Services, FY17 (To Date)**

Indicator	Figure
Requests	3,675
Percent Closed Late	67%
Response Time (Days)	71
Square Footage Cleaned	151,784

Source: Budget Question #101, FY 2018

This recommended proposal could leverage community partnerships to improve the city’s graffiti efforts.

- This item would leverage existing resources at the city and in the community to improve abatement response time.
- The Graffiti Abatement Task Force³ and subsequent Graffiti Abatement Blueprint⁴ both recommend improving community engagement efforts and leveraging existing community capacity to improve abatement services.

Item G-15

Updating EMS Software to Improve Patient Outcomes

This proposal would update Emergency Medical Services’ (EMS) software for tracking patient records.

- This would invest \$400,000 this year in replacing EMS’ outdated system for tracking patients’ medical records.
- This would be the first of six annual \$400,000 payments for this system, though future payments could be partially offset by phasing out the old system, which currently costs roughly \$115,000 per year in maintenance.

Table 2. EMS Services, FY16

Indicator	Incidents
Total Responses	131,007
Contact w/Patients	100,491
Transferred Patient	78,725

*Source: Public Safety Commission
Recommendation #20170807-003*

EMS’ current patient records system is outdated & inefficient.

- EMS is required to input patient information – and to share that information with other medical providers to whom they transfer those patients.
- However, EMS’ current software lacks important features, making it more difficult to track health information, manage cases effectively, and integrate with other record systems.

This stakeholder-recommended proposal would improve patient outcomes and system efficiency.

- An updated system would enable EMS to improve patient recordkeeping, save time, & reduce IT maintenance costs.
- Both the Public Safety Commission and the IT Governance Board have recommended updating EMS’ software.

¹Assistant City Manager’s Office.

²Deborah Lamm Weisel, “Graffiti,” U.S. Department of Justice Community Oriented Policies Services (2009).

³Memorandum from Shannon Jones to Mayor & Council: Staff response to Resolution No. 20160804-056 (1 November 2016).

⁴“City of Austin Anti-Graffiti Blueprint for Graffiti Success DRAFT,” The Graffiti Consultants (14 August 2017).